

## Retail Food Establishment Inspection Report

Floyd County Health Department Telephone:812-948-4726

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Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Slate	ment Nan	Elener	tury			Telephone Number	Date of (mm/d	f Inspection d/yr)	ID#
Establishment Address (number and street, city, state, zip code)  SUCCO Kaner- Miller Rd New Albert, IN 47150						( ) Owner	i	5/2019	18-3/4
Owner				7,,2,,	טביוו או	Purpose:	Wallow		<u> </u>
Owner's Address  Craffix Rd Non Albert, IN 47150  Person in Charge  Jonet Leach  Responsible Person's E-mail  Certified Food Handler  John Leach (4/19/2019)  CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N							1. Routine 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list)  Summary of Violations:  C		
						7			
						3. Complaint			
VIOLATIO	d items a ON(s) Repi	RE IDENT	TFIED IN TE	HE CHECKLIST AND NARH DUS INSPECTIONS ARE DE	ATIVE COLUMNS NOTED IN THE "SI	MARKED "C"	ID THE SEC.		
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